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Signature: /Michael E. Milz/

Client Reference No. PA-5330-CIP

Group Art Unit No.: 3709

Extension Months	Other Than Small Entity	Small Entity
<input type="checkbox"/> One Month	\$130.00	\$65.00
<input type="checkbox"/> Two Months	\$490.00	\$245.00
<input checked="" type="checkbox"/> Three Months	\$1,110.00	\$555.00
<input type="checkbox"/> Four Months	\$1,730.00	\$865.00
<input type="checkbox"/> Five Months	\$2,350.00	\$1,175.00

Payment Method:

- ☐ Payment by credit card in the amount of \$_____ to cover the fees listed above.
Form PTO-2038 is enclosed for this purpose.
- ☒ The Commissioner is hereby authorized to charge \$1,110.00 to cover the fees listed
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- ☒ The Commissioner is hereby authorized to charge any deficiencies in fees or credit
overpayment to Deposit Account No. 23-1925.

Respectfully submitted,

Dated: October 24, 2008

/Michael E. Milz/
Michael E. Milz, Reg. No. 34,880
Attorney for Applicant(s)

BRINKS HOFER GILSON & LIONE
P.O. BOX 10395
CHICAGO, IL 60610
(312) 321-4200